

Rx News Bulletin

Bureau of Narcotics & Dangerous Drugs

Missouri Department of Health and Senior Services

health.mo.gov/safety/bndd/index.php

Missouri BNDD Regulation Already Matches Federal CARA Law for EMS Registrations

The federal Comprehensive Addiction and Recovery Act of 2016 (CARA) enacted by congress instructs the Drug Enforcement Administration (DEA) to amend their regulations regarding EMS registrations. The new federal law allows EMS agencies to have just one registration at their headquarters, but then list additional locations. The Missouri BNDD state drug registration already allows for EMS entities to have a single registration.

Reminder from BNDD...

The prescriber must be present the same day controlled substance prescriptions are issued. Prescriptions cannot be written in advance to be handed out later.

The bureau wishes to remind practitioners of the existing state and federal controlled substance laws regarding the issuance of prescriptions for controlled substances.

When a practitioner signs a prescription, it must be signed on the same date it was written and issued to the patient. BNDD has recently seen some practices in violation of these laws when a prescriber may write out and sign dozens of prescriptions on a Monday, so that clinic staff can hand those prescriptions out to patients during the remainder of the week. In some cases there are patients arriving at a clinic and seeing the nursing staff, and then they are given a prescription the doctor wrote a day or so before. These practices are not allowed by the law.

DEA Regulation 21 CFR 1306.05(a) states:

All prescriptions for controlled substances shall be dated as of, and signed on the day when issued.

Section 195.060.1, RSMo, states in material part:

All written prescriptions shall be signed by the person prescribing the same. All prescriptions shall be dated on the day when issued.

Regulation 19 CSR 30-1.062(3), states:

(3) Written Prescriptions. All written controlled substance prescriptions shall be signed by the prescribing practitioner on the date prescribed. No controlled substance prescription shall be signed prior to the actual date it is issued.

The BNDD reminds prescribers to be physically present when signing, dating and issuing the prescription to a patient. If a practitioner has several clinics in different locations where patients require controlled substances, the practitioners are urged to schedule all of those patients on the same day the practitioner is in that clinic so prescriptions can be signed and handed to the patient in person.

BNDD Encourages CDC Opiate Prescribing Guidelines

The CDC identified subject matter experts with high scientific standing; appropriate academic and clinical training and relevant clinical experience; and proven scientific excellence in opioid prescribing, substance use disorder treatment, and pain management. CDC identified representatives from leading primary care professional organizations to represent the audience for this guideline. Finally, CDC identified state agency officials and representatives based on their experience with state guidelines for opioid prescribing that were developed with multiple agency stakeholders and informed by scientific literature and existing evidence-based guidelines. The process included comments from stakeholders and a lengthy and thorough peer review process. The guideline is intended for primary care clinicians (e.g., family physicians and internists) who are treating patients with chronic pain (i.e., pain lasting >3 months or past the time of normal tissue healing) in outpatient settings.

CDC Guideline for Prescribing Opioids for Chronic Pain—United States 2016, Pages 3--5

The Missouri BNDD has published the guideline on the bureau's website at www.health.mo.gov/BNDD under the link to [Publications](#).

The bureau specifically wants to call attention to page sixteen (16) of the guideline that provides a one-page summary of the opiate prescribing guidelines.

- Patients receiving opioids for acute care should not receive more than a seven (7) day supply.
- Prescribers should start with the lowest doses of opioids possible to address the pain level.
- Patients receiving opioids for acute care should only receive immediate release (IR) formulations and not extended release (ER).
- Chronic pain is more lingering pain that would be treated for three to six months.
- Patients should be seen at least every 30 days for evaluation.
- Patients receiving opioids for acute care should only receive immediate release (IR) formulations and not extended release (ER). The extended release formulas are for cancer pain patients.
- Prescribers should discuss pain management with the patient and develop a strategy. The prescribing of opioids should not last more than six (6) months.
- Prescribers should carefully reassess evidence of individual benefits and risks when increasing dosage to ≥ 50 morphine milligram equivalents (MME)/day, and should avoid increasing dosage to ≥ 90 MME/day or carefully justify a decision to titrate dosage to ≥ 90 MME/day.
- Prescribers should avoid prescribing opioids and benzodiazepines concurrently whenever possible.



Saturday, April 28
10 a.m. – 2 p.m.
DEA Take Back.com



DEA National Drug Take-Back Day—April 28, 2018

The DEA has announced their next national take-back day is Saturday, April 28, 2018. Law enforcement agencies are authorized to collect unwanted medications for disposal. Additional information can be obtained at <https://takebackday.dea.gov> or also at www.deadiversion.usdoj.gov.

Governor Greitens Announces Crackdown on Medicaid Providers Overprescribing Opioids

Governor Greitens announced a new effort to protect Missourians from opioid addiction by cracking down on providers who over-prescribe powerful drugs. Medicaid providers who refuse to comply with Centers for Disease Control and Prevention guidelines will be held accountable.

Statement from Governor Eric Greitens: “Too often, Missourians seeking real help are getting hooked on dangerous drugs that threaten their lives. We trust doctors to give us sound advice, and most of them do. Family doctors in communities across the state take good care of people and save lives. Still, in every system there are bad actors who put greed, ease, or profit ahead of their mission to help people.

There are prescribers manipulating the system and creating or feeding dangerous habits. Last year, there were more than 1.2 million opioid prescriptions in our Medicaid system alone—sometimes destroying the lives and families of our neighbors.

Today we announced a new initiative that will hold providers in the Medicaid system who prescribe too many opioids, and refuse to change their ways, accountable for their actions. The people who push unnecessary, expensive, and powerful prescriptions to Missourians are ruining lives, and we’re working to stop it. We’re cracking down on this dangerous behavior within the Medicaid system to keep patients safe and protect our communities from the opioid epidemic that threatens so many families.”

The Department of Social Services (DSS), the Department of Mental Health (DMH), and the Department of Health and Senior Services (DHSS) have joined forces to implement national standards for prescribing opioids to chronic pain patients. The departments are working to bring MO HealthNet (Missouri Medicaid) providers who aren’t following Centers for Disease Control and Prevention (CDC) guidelines into compliance when it comes to opioid prescriptions.

In 2017, 10 percent of all MO HealthNet patients received opioids. This means 1.2 million opioid prescriptions were paid for by MO HealthNet, at a cost of more than \$10 million. More than 8,000 Medicaid prescribers whose prescribing habits do not adhere to one or more Quality Indicators™ pertinent to the use of an opioid for management of pain have already been identified.

DSS will refer MO HealthNet prescribers who fail to respond within 20 business days from the receipt of the second notification to their respective licensing board and the Bureau of Narcotics and Dangerous Drugs within DHSS.

“In an effort to educate providers and advance evidence-based management of pain, MO HealthNet prescribers who have not adhered to safe opioid prescribing guidelines have received multiple notifications,” said Steve Corsi, Psy.D., Director, DSS. “The Department has a duty to ensure the health and wellbeing of MO HealthNet participants. From this point forward, DSS, DMH, and DHSS are informing prescribers who appear to have prescribing patterns that could be unsafe to address the issue or be referred to the appropriate licensing board. DSS and MO HealthNet are committed to providing consultation, training or assistance in an effort to improve a provider’s compliance with CDC opioid prescription guidelines.”

For some MO HealthNet providers serving patients with opioid use disorder, addressing the issue may mean a referral for services at programs certified by the DMH. “The solution to the opiate epidemic must include modern treatment,” said Mark Stringer, Director, DMH. “That means offering patients FDA-approved medications for opioid use disorder along with counseling and other services.”

“Eighty percent of heroin users indicate they got their start by misusing prescription drugs,” said Randall Williams, M.D., Director, DHSS. “Last year was a pivotal year in Missouri’s campaign to help families affected by the opioid crisis, which is the number one health crisis in America today. Preliminary data indicates that the rapid rise in overdose deaths from 2015-2016 has slowed, but it’s vital that we move forward and ensure that people aren’t initiating therapy with inappropriate amounts of narcotics that will set them on a course for addiction.”

Continued...

"I want to assure MO HealthNet participants that the majority of MO HealthNet prescribers are compliant with the CDC guidelines for prescribing opioids for chronic pain," said Dr. Corsi. "Every MO HealthNet participant trusts their health care provider is delivering safe and appropriate care. With the support of DMH and DHSS, the DSS will ensure all MO HealthNet prescribers live up to that expectation."

Support from Legislators and Stakeholders:

Rep. Holly Rehder (R-148): "Ensuring all prescribers know and are following best practices when it comes to opioids is something the Department has been lax on for too many years. Dr. Corsi and his passion to fight opioid abuse and misuse is a breath of fresh air. This will make a real difference in people's lives who struggle with addiction."

Rep. Cody Smith (R-163): "I applaud Director Corsi and the Department for aggressively dealing with bad actors. Opioids have become a public health epidemic and I'm glad to see the Department take this important step."

Rep. Crystal Quade (D-132): "This year I filed HB 1310 that directs DHSS to promulgate rules that enforce CDC guidelines for opioid prescriptions. I'm pleased our administrative agencies are coming together to educate prescribers who are not complying and taking action, when necessary, to protect Missouri lives."

Rep. Robert Ross (R-142): "I appreciate the leadership being shown by Dr. Corsi and the Department. It's about time we started cracking down on bad actors in this state who aren't following best practices when it comes to prescribing opioids."

"The Missouri Coalition for Community Behavioral Healthcare, and its 33 behavioral health member agencies, applaud the Governor's new initiative to use prescribing data combined with education, intervention and enforcement to improve prescribing practices around opioids," said **Brent McGinty**, President/CEO, Missouri Coalition for Community Behavioral Healthcare. "We stand ready to do even more as resources become available to provide the treatment needed to respond to this nation's opioid epidemic."

"Addressing the state's opioid crisis will require engagement by all stakeholders," said **Herb B. Kuhn**, Missouri Hospital Association President and CEO. "This includes patients, providers and payers."

"The Missouri League for Nursing is in full support of the state of Missouri's collaborative effort to ensure the safety of our residents and educate our prescribers in their role in leadership to address this number one health crisis in the United States," said **Peggy Neale-Lewis**, RN, CPHQ, President, Missouri League for Nursing.

For additional information please visit
<https://dss.mo.gov/mhd/providers/opi-program.htm>.

Check It Out

You can find educational documents on the BNDD website at <http://health.mo.gov/safety/bndd/publications.php>. Documents such as the "CDC Opiate Prescribing Guidelines" and also "Preventing Prescription Fraud" can be viewed.

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Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health and Senior Services, BNDD, P.O. Box 570, Jefferson City, MO, 65102, (573) 751-6321. Hearing- and speech-impaired citizens can dial 711. EEO/AAP services provided on a nondiscriminatory basis.